



16569 U.S.P.T.O.

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PTO/SB/05 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	13757US03
First Inventor	Amir Morad
Title	SYSTEM AND METHOD FOR VIDEO AND AUDIO ENCODING ON A SINGLE CHIP
Express Mail Label No.	EV 304938414 US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																															
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 28] (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 9]</p> <p>5. Oath or Declaration [Total Sheets 8] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6 <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>																																	
<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>																																	
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & documents(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b) (2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other:</p>																																	
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: □ Continuation □ Divisional □ Continuation-in-part (CIP) of prior application No.:</p> <p>Prior application information: Examiner: _____ Art Unit: _____</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																																	
<p>19. CORRESPONDENCE ADDRESS</p> <table border="1"> <tr> <td><input checked="" type="checkbox"/> Customer Number:</td> <td>23446</td> <td>OR</td> <td><input type="checkbox"/> Correspondence address below</td> </tr> <tr> <td>Name</td> <td colspan="3"></td> </tr> <tr> <td>Address</td> <td colspan="3"></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> <td></td> </tr> <tr> <td>Country</td> <td>Telephone</td> <td>312-775-8000</td> <td>Fax</td> <td>312-775-8100</td> </tr> <tr> <td>Name (Print/type)</td> <td colspan="2">Kevin E. Borg</td> <td>Registration No. (Attorney/Agent)</td> <td>51,486</td> </tr> <tr> <td>Signature</td> <td colspan="2"></td> <td>Date</td> <td>February 10, 2004</td> </tr> </table>			<input checked="" type="checkbox"/> Customer Number:	23446	OR	<input type="checkbox"/> Correspondence address below	Name				Address				City	State	Zip Code		Country	Telephone	312-775-8000	Fax	312-775-8100	Name (Print/type)	Kevin E. Borg		Registration No. (Attorney/Agent)	51,486	Signature			Date	February 10, 2004
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U.S. PTO

PTO/SB/17 (11-00)

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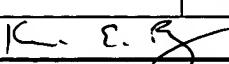
FEE TRANSMITTAL for FY 2004

Patent Fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$770.00)

Complaint if Known	
Application Number	unassigned
Filing Date	herewith
First Named Inventor	Amir Morad
Examiner Name	unassigned
Group Art Unit	unassigned
Attorney Docket No.	13757US03

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																																																																																																																																										
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 10%;">Deposit Account Number</td><td style="width: 90%;">13-0017</td></tr> <tr><td>Deposit Account Name</td><td>McAndrews Held & Malloy</td></tr> </table> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>				Deposit Account Number	13-0017	Deposit Account Name	McAndrews Held & Malloy	<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Kevin E. Borg	Registration No. (Attorney or Agent)	51,486
Signature			Date
			February 10, 2004

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